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PUBLISHER'S PAGE

Medical technology: opportunities, responsibilities

The recent interest in US dentist Barney Clarke's acquisition of an artificial heart spurred a new public awareness of just how far medical technology has come in the last 20 to 30 years. When one considers that some three decades ago about the only artificial medical devices available were wooden legs and glass eyes, the progress has been remarkable. But that progress has brought into sharper focus a number of sociologic, philosophic and ethical issues. These issues were clearly of great concern to speakers and delegates at the December conference in Toronto on medical device technology in the 1980s. Delegates to the conference, which was sponsored by the federal government departments of National Health and Welfare and of Industry, Trade and Commerce as well as by the Canadian Association of Manufacturers of Medical Devices, heard William Rompkey, minister of state for small business and tourism, say that the potential for growth in the field of medical technology "is very substantial". Rompkey noted that, at present, only about 25% of the \$1.4 billion health care products market is supplied from domestic production. By any standards that represents an enormous opportunity.

Along with that opportunity, though, come some very clear responsibilities. As one speaker, Dr. Ajit DasGupta, director of the bureau of medical devices, environmental health directorate, Department of National Health and Welfare, put it: technology is a two-edged sword; it offers power but also problems. Industry, academe and government must collaborate, he said, to deal with these problems — among them, such issues as effectiveness, availability and cost.

Perhaps the major challenge of the new technology — described by one speaker as the spare-parts medicine that will be the revolution of the last 20 years of this century — is in helping the growing numbers of elderly people in our population. For the most part, it is not so much medicine that they need as devices. And, as another speaker pointed out, the devices don't have to be *medical* — a walker for an 80-year-old man with arthritis is as much a toy or a tool as is a baby carriage wheeled by an 18-month-old girl.

As Minister of National Health and Welfare Monique Bégin told the conference: there will have to be collaboration rather than confrontation. "The hazards associated with medical devices pose problems that cannot be left to industry alone", she said. "Protection to consumers from ineffective and hazardous medical products, promotion of their judicious use and control of abuse all require to a lesser or greater extent the presence of a government supervisory agent to stand between industry and the marketplace."

Next May a huge conference on medical device technology is scheduled to be held in Edmonton. Titled "Medic '83", it should provide a further opportunity to cement this collaboration and to define more clearly the ethical and philosophic issues related to medical technology. One hopes that industry will seize the enormous opportunities that await it in this field — while acknowledging that it has a heavy responsibility, along with government, to ensure the benefits and efficacy of its wares.

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